

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 11:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F86576

(8)

1. Corporation Number

HALLMARK PRESS INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/18/1982 3a. Date of Last Report 05/01/1994

4. FEI Number 59-2237600 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. This corporation has liability for nonpayment of taxes ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address

21. State Apt. # etc. 26. State Apt. # etc.

22. City & State 27. City & State

23. 28.

24. 25. 29. 30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROSKIN, SOLOMAN
1337 NW 155TH DR
MIAMI FL 33138

01. Name
02. Street Address (P.O. Box Number is Not Acceptable)
03.
04. City FL 05. Zip Code

11. Pursuant to the provisions of Sections 607.01(3) and 607.15(3), Florida Statutes, the above named corporation solemnly this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am a resident of the State of Florida and accept the obligations of Sections 607.01(3) Florida Statutes.

SIGNATURE

Signature of Current Registered Agent (This must appear with a signature)

Signature of New Registered Agent (This must appear with a signature)

Signature

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (1)

NAME P
ROSKIN, CAROLYN
STREET ADDRESS 1000 QUAYSIDE TERR, #511
CITY, ST, ZIP MIAMI FL 00000
NAME VP
ROSKIN, SOLOMAN
STREET ADDRESS 1000 QUAYSIDE TERRACE
CITY, ST, ZIP MIAMI FL
NAME
STREET ADDRESS
CITY, ST, ZIP
NAME
STREET ADDRESS
CITY, ST, ZIP
NAME
STREET ADDRESS
CITY, ST, ZIP
NAME
STREET ADDRESS
CITY, ST, ZIP
NAME
STREET ADDRESS
CITY, ST, ZIP

NAME P
ROSKIN, CAROLYN
STREET ADDRESS 20281 E. Country Club Drive, #208
CITY, ST, ZIP Miami, FL 33180
NAME VP
ROSKIN, SOLOMAN
STREET ADDRESS 20281 E. Country Club Drive, #208
CITY, ST, ZIP Miami, FL 33180
NAME VP
SPIN, ERIC
STREET ADDRESS 20281 E. Country Club Drive, #208
CITY, ST, ZIP Miami, FL 33180
NAME
STREET ADDRESS
CITY, ST, ZIP
NAME
STREET ADDRESS
CITY, ST, ZIP
NAME
STREET ADDRESS
CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.02(4)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. That I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, is an attachment with an address.

SIGNATURE:

Eric Spin

ERIC SPIN

4/28/94

305-601-8686

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR